MEMORANDUM OF UNDERSTANDING NO. ______ BETWEEN THE STATE OF ARKANSAS DEPARTMENT OF INFORMATION SYSTEMS AND NAME OF CONTRACTOR

This agreement, by and between the State of Arkansas, <u>Department of Information Systems</u>, hereinafter referred to as the "State" and NAME OF CONTRACTOR, hereinafter referred to as the "Contractor" is as follows:

The Contractor understands and agrees that this Memorandum of Understanding (MOU) is governed by the provisions of Department of Information Systems RFP Number DIS-020503, hereinafter referred to as the "Master Contract." In the provision of services pursuant to this Memorandum of Understanding, the Contractor will conform to these provisions in their entirety. In the event of a conflict between the MOU (and its Addenda), and the Master Contract, the documents shall govern in the order of preference given in the Master Contract.

The Contractor agrees to provide the services for the attached Job Classifications, as described in this MOU and these addenda:

- 1. Statement of Work
- 2. Addendum A
- 3. Addendum B
- 4. etc.

In no event shall the maximum liability of the State under this MOU exceed XXXXX XXXXX XXXXX XXXXX dollars (\$XXX,XXX). For the services provided pursuant to this MOU, this amount shall constitute the MOU Project Price and the entire potential compensation due the Contractor for the services and all of the Contractor's obligations hereunder regardless of the difficulty, or materials or equipment required. The Contractor shall be compensated on an hourly, as-used basis.

Payments to the Contractor pursuant to this MOU will be made in accordance with the "Payment Terms" of the Master Contract. Invoices shall be submitted to:

Department of Information Systems

ATTN: Contracts Section

One Capitol Mall/PO Box 3155

Little Rock, AR 72203

The State may, at any time and for any reason, terminate this MOU in accordance with the provisions of the Master Contract.

This agreement may be modified only by a written amendment which has been executed and approved by the appropriate State officials as indicated below.

2/3/2003

ATTACHMENT G

IT Professional Services Memorandum of Understanding

NAME OF CONTRACTOR		
By:	DATE:	
Title:	_	
CONTRACTOR SIGNATORY, TITLE		
STATE OF ARKANSAS:		
DIS		
By:	DATE:	
Title:	_	

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ADDENDUM A

SOW No.	Job Classification No.	
Contractor Employee Name:		
Estimated No. of Hours:	Hourly Rate:	
Project Begin Date:	Project End Date:	
Estimated Total Compensation:		

2/3/2003